## CONTRACT AND ENCUMBRANCE INFORMATION SHEET \*\*\*AN ORIGINAL AND 1 COPY OF THIS FORM MUST BE SUBMITTED\*\*\*

THIS SHEET MUST BE COMPLETED, SIGNED BY THE DEPARTMENT HEAD AND DIVISION DIRECTOR AND ATTACHED TO ALL CONTRACT AND RESOLUTION PACKETS BEFORE ANY ACTION WILL BE TAKEN.

rreparer's	Name, Telephone #, and E-Mail Address:
Mattie Harr	ris, 922-0725, harris-m@scgheadstart.com
DESCRIPTION	OF ITEM TO BE PURCHASED, BUILT, OR SERVICE TO BE PROVIDED
Head Start	Program and Administrative Services for 40 children
NAME, ADDRE	SS, VENDOR NUMBER/CONSULTANT/AGENCY WITH WHICH SHELBY COUNTY
University	of Memphis Research Support Services 315 Administration emphis, TN 38152-3370 Attn: Mable Dixon, Contract Officer
VENDOR NO.	10189
COST OF ITE	M OR SERVICE REQUESTED: \$315,691.00
TERM OF PRO	POSED CONTRACT/AGREEMENT: 01-01-09 thru 12-31-09
	AND ACCOUNT NUMBER (13 DIGITS) **FOR MULTIPLE ACCOUNTS, PILLAR AMOUNT FOR EACH**
104-480360	
COMMODITY	ODE: 961-10
VENDOR/CONS	SULTANT/AGENCY SELECTED BY (CHECK ONE):
VENDOR/CONS	
VENDOR/CONS **PLEASE AT	SULTANT/AGENCY SELECTED BY (CHECK ONE): TACH APPROVAL DOCUMENTS**
VENDOR/CONS	SULTANT/AGENCY SELECTED BY (CHECK ONE): TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date
VENDOR/CONS **PLEASE AT	SULTANT/AGENCY SELECTED BY (CHECK ONE): TACH APPROVAL DOCUMENTS**
VENDOR/CONS **PLEASE AT ax_ b	SULTANT/AGENCY SELECTED BY (CHECK ONE): TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date
VENDOR/CONS **PLEASE AT aX b LOSB/MBE IN	BULTANT/AGENCY SELECTED BY (CHECK ONE): TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date Emergency/Sole Source  FORMATION: Please check the appropriate description
VENDOR/CONS **PLEASE AT ax b	BULTANT/AGENCY SELECTED BY (CHECK ONE):  TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date  Emergency/Sole Source  IFORMATION: Please check the appropriate description  (MINORITY OWNED BUSINESS ENTERPRISE)
VENDOR/CONS **PLEASE AT ax b LOSB/MBE IN	BULTANT/AGENCY SELECTED BY (CHECK ONE):  TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date Emergency/Sole Source  IFORMATION: Please check the appropriate description  (MINORITY OWNED BUSINESS ENTERPRISE) MALE FEMALE
VENDOR/CONS **PLEASE AT ax b LOSB/MBE IN MBE WBE	BULTANT/AGENCY SELECTED BY (CHECK ONE):  TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date  Emergency/Sole Source  IFORMATION: Please check the appropriate description  (MINORITY OWNED BUSINESS ENTERPRISE)  MALE FEMALE  (WOMEN OWNED BUSINESS ENTERPRISE)
VENDOR/CONS **PLEASE AT ax b LOSB/MBE IN MBE WBE	BULTANT/AGENCY SELECTED BY (CHECK ONE):  TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date Emergency/Sole Source  IFORMATION: Please check the appropriate description  (MINORITY OWNED BUSINESS ENTERPRISE)  MALE FEMALE (WOMEN OWNED BUSINESS ENTERPRISE) (LOCALLY OWNED SMALL BUSINESS)
VENDOR/CONS **PLEASE AT ax b LOSB/MBE IN MBE WBE LOSB	BULTANT/AGENCY SELECTED BY (CHECK ONE):  TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date  Emergency/Sole Source  IFORMATION: Please check the appropriate description  (MINORITY OWNED BUSINESS ENTERPRISE)  MALE FEMALE  (WOMEN OWNED BUSINESS ENTERPRISE)
VENDOR/CONS **PLEASE AT ax b LOSB/MBE IN MBE WBE	BULTANT/AGENCY SELECTED BY (CHECK ONE):  TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date Emergency/Sole Source  IFORMATION: Please check the appropriate description  (MINORITY OWNED BUSINESS ENTERPRISE)  MALE FEMALE (WOMEN OWNED BUSINESS ENTERPRISE) (LOCALLY OWNED SMALL BUSINESS)
VENDOR/CONS **PLEASE AT ax b LOSB/MBE IN MBE WBE LOSB X N/A	BULTANT/AGENCY SELECTED BY (CHECK ONE):  TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date Emergency/Sole Source  IFORMATION: Please check the appropriate description  (MINORITY OWNED BUSINESS ENTERPRISE)  MALE FEMALE (WOMEN OWNED BUSINESS ENTERPRISE) (LOCALLY OWNED SMALL BUSINESS)
VENDOR/CONS **PLEASE AT  ax b LOSB/MBE IN MBE WBE LOSB X N/A	BULTANT/AGENCY SELECTED BY (CHECK ONE):  TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date  Emergency/Sole Source  IFORMATION: Please check the appropriate description  (MINORITY OWNED BUSINESS ENTERPRISE)  MALE (WOMEN OWNED BUSINESS ENTERPRISE)  (LOCALLY OWNED SMALL BUSINESS)  ANNUAL SALES DOES NOT EXCEED \$3 MILLION
VENDOR/CONS **PLEASE AT ax b LOSB/MBE IN MBE WBE LOSB X N/A	BULTANT/AGENCY SELECTED BY (CHECK ONE):  TACH APPROVAL DOCUMENTS**  Bid/RFP Process - # & Date  Emergency/Sole Source  IFORMATION: Please check the appropriate description  (MINORITY OWNED BUSINESS ENTERPRISE)  MALE (WOMEN OWNED BUSINESS ENTERPRISE)  (LOCALLY OWNED SMALL BUSINESS)  ANNUAL SALES DOES NOT EXCEED \$3 MILLION
VENDOR/CONS **PLEASE AT ax b LOSB/MBE IN MBE WBE LOSB X N/A	BID SULTANT AGENCY SELECTED BY (CHECK ONE):  TACH APPROVAL DOCUMENTS**  Bid / RFP Process - # & Date
VENDOR/CONS **PLEASE AT ax b LOSB/MBE IN MBE WBE LOSB X N/A	BID SULTANT AGENCY SELECTED BY (CHECK ONE):  TACH APPROVAL DOCUMENTS**  Bid / RFP Process - # & Date

DIVISION DIRECTOR

DATE